MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

| ABU | ELITO CHEESE | 272 | 20056 | |
|-----|--|--------------|-------|-----|
| 1. | Month of 1/08 | | | |
| 2. | Is Outlet # (8 digit) Correct? | Y | N | N/A |
| 3. | Is average Total flow-gal.day stated in space provided? | \mathbf{Y} | N | N/A |
| 4. | Is max. Total flow-gal day stated in space provided? | \mathbf{Y} | N | N/A |
| 5. | Is method used to calculate water stated? | Y | N | N/A |
| 6. | Are number of working days stated? | Y | N | N/A |
| 7. | Are there any parameters which have exceeded PVSC Local Limits? | Y | N | N/A |
| 8. | Is proper compliance/non-compliance statement provided? | Y | N | N/A |
| 9. | Have correct number of samples been submitted? | Y | N | N/A |
| 10. | Has PHC result been listed on MR-1 report? | Y | N | N/A |
| 11. | Has sample number been reported in space provided? | \mathbf{Y} | N | N/A |
| 12. | Have all regulated parameters been listed on MR-1? | Y | N | N/A |
| 13. | Has sample type been stated on MR-1? | Y | N | N/A |
| 14. | Have all samples been taken during this reporting period? | Y | N | N/A |
| 15. | Has NJDEPE certified lab been used? | Y | N | N/A |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | Y | N | N/A |
| 17. | Have results been written in space designated on MR-1? | \mathbf{Y} | N | N/A |
| 18. | Is correct method used to preserve samples stated on MR-1? | \mathbf{Y} | N | N/A |
| 19. | Has MR-1 been signed by authorized representative? | Y | N | N/A |
| 21. | Has information been submitted on proper MR-1 form? | Y | N | N/A |

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

| First Reviewer: comme | ents on deficiencies | |
|-----------------------|----------------------|--|
| Date Reviewed | Date sent to user | |
| Date due back | Reviewer / | |
| Second review commer | nts on deficiencies | |
| | | |
| Date Reviewed | Date sent to user | |
| Date due back | Reviewer | |
| Date | Reviewer | |

mark.

PRETREATMENT MONITORING REPORT

| NAME: Abuelito Cheese | | | DEC 1 9 2008 |
|--|---|--------------------|--------------|
| MAILING ADDRESS: 607-609 Main Street Paterson N | I.J. | | 1.0 |
| FACILITY LOCATION: 607-609 Main Street Paterson | N.J. | IN | |
| CATEGORY & SUBPART: | | OUTLET #: | Ī |
| CONTACT OFFICIAL :Carol Paiz | | TELEPHONE: _ | 973-345-3503 |
| NEW CUSTOMER ID / OUTLET ID:27220056-1 | OLD OUTLET DES | SIGNATION: | |
| MONITORING PERIOD Start End | | Average | Maximum |
| 11 01 08 11 30 08 | Regulated Flow-gal/day Total Flow-gal/day 6 | 5205 6825 | |
| MO DAY YR MO DAY YR | - | | |
| Method Used: Ending meter reading less beginning meter 19213 x 7.48x.95 divided by 22 Days | | divided by 22 days | |

| PARAMETER | 11 10 | MASS OR CONCENTRATION | | | # OF | SAMPLE TYPE | |
|-----------|---|--|-----------|-------|------------|-------------|--|
| | 1-19 | MON AVG | MAXIMUM | UNITS | SAMPLES | COMP/GRAB | |
| Cd | Sample Measurement | < 0.001 | | Mg/l | 1 | Comp | |
| | Permit Requirement | 0.19 | | Mg/l | | | |
| Cu | Sample Measurement | < 0.008 | | Mg/l | 1 | Comp | |
| | Permit Requirement | 3.02 | | Mg/l | | | |
| Pb | Sample Measurement | 0.00287 | | Mg/l | 1 | Comp | |
| | Permit Requirement | 0.54 | | Mg/l | | | |
| Hg | Sample Measurement | ≉ 0.000749 | | Mg/l | 1 | Comp | |
| | Permit Requirement | 0.080 | | Mg/l | | | |
| Ni | Sample Measurement | < 0.004 | | Mg/l | 1 | Comp | |
| | Permit Requirement | 5.9 | | Mg/l | | | |
| Zn | Sample Measurement | 0.252 | | Mg/l | 1 | Comp | |
| | Permit Requirement | 1.67 | | Mg/l | | | |
| | Sample Measurement | | | Mg/l | 1 | Grab | |
| | Permit Requirement | | | Mg/l | | | |
| | Sample Measurement | | | Mg/l | 1 | Grab | |
| | Permit Requirement | | | Mg/l | | | |
| | Sample Measurement | | | | | | |
| | Permit Requirement | | | | | | |
| | Sample Measurement | | 2272 | 8200 | | | |
| | Permit Requirement | | 65202 | 30,2 | | | |
| | Sample Measurement | 4., | 100 | 4 | | 1 | |
| | Sample Measurement Permit Requirement | | 13 | | | | |
| | Sample Measurement | 3 | N 10 | | ادی | 1 _/ | |
| | Permit Requirement | 12 | N SAN | 20. | .5 | | |
| | Sample Measurement Permit Requirement Sample Measurement Permit Requirement | 20 | O my 24 h | 009 | 5 (| | |
| | Permit Requirement | 4 | 12 | W . | Y / | | |
| | Sample Measurement | 57 | 1500 | 97 | | | |
| | Permit Requirement | 20 | 190 | 10 | | | |
| | Sample Measurement | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 31914 | 12131 | | | |
| | Permit Requirement | 430/ | | | | | |

Production Rate (if applicable)

| | PRETREATMENT MONITORING REPORT | DEC 1 9 2008 |
|--|--|---|
| Certification of Non-Use if applicable (use a | dditional sheets): | 1 |
| | | |
|) | | * . |
| | | |
| | h compliance schedule (use additional sheets if necessar | y) for every |
| parameter used: El Abuelito is in complia | ance with the rules and regulations of PVSC | |
| | | |
| | | |
| Explain Method for preserving samples: | Metals samples taken in glass containers and preserved w | with nitric acid to a ph of less than 2 |
| No te: no changes made to the plot plan for the | is facility | |
| a system designed to assure that qualifi person or persons who manage the syste to the best of my knowledge and belief | is document and attachments were prepared under need personnel properly gather and evaluate the inform, or those persons directly responsible for gathering, true, accurate and complete. I am aware that therefine and imprisonment for knowing violations. | mation submitted. Based on my inquiry of the the information, the information submitted is, |
| 403.6(a)(2)(ii) revised by 53 FR 4061 | 0. October 17, 1988 | |
| | Signature of Principal Executive or Authorized Agent | |
| | Carol Paiz | |
| | General Manager | |
| | Type Name and Title | |
| | 12/10/08 | |

Date

PVSC FORM MR-I REV: 4 6/87 P I

Abuelito Cheese Process Water Meter Reading

19213cu/ft x 7.48=143713 x.95=136527 total gallons for the month of November 136527 divided by 22 days= 6205 gallons per day

INTEGRATED ANALYTICAL LABORATORIES CHAIN OF CUSTODY

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273 Franklin Rd Randolph, NJ 07869

GUARANTEED WITHOUT LAB APPROVAL, RUSH SURCHARGES WILL APPLY IF ABLE Report Format DISKETTE lab approved custom EDD DISK/CD REC Juon .wkl format .dbf format **PRESERVATIVES** Other. # BOTTLES & MDL Req: GWQS - SCC - OTHER (SEE COMMENTS) Lab notification is required for RUSH TAT prior to sample arrival. RUSH TAT IS NOT HO9W Cooler Temp +OS7H Other (describe) Jo Results Only Regulatory Reduced EONH HOEN PAGE: HCI Rush TAT Charge ** 24 hr - 100%... 48 hr - 75%.... 72 hr - 50%.... 96 hr - 35%.... 5 day - 25%.... 6-9 day 10% Turnaround Time (starts the following day if samples rec'd at lab > 5PM) ANALYTICAL PARAMETERS Lab Case # Results needed by: Low Med High Comments: 72 hr* 1 wk* 2 wk/Std NA 3 wk/Std × Conc. Expected: TO ACCOMINIODATE** S E S E S E Please print legibly and fill out completely. Samples cannot be processed and the turnaround time will not start until any 72 hr × BOD Conditional TPHC 48 hr* 48 hr wk* call for price Hard Copy Verbal/Fax 24 hr* 24 hr* IAL# HANOVER CONTROLS East Hanover, NJ 07936 7 DW - Drinking Water AQ - Aqueous WW - Waste Water REPORT TO: HANOVER CONTROLS 11 Windsor Way East Hanover, NJ 07936 OI - Oil LIQ - Liquid (Specify) OT - Other (Specify) Matrix REPORTING INFO WW John Ceresnak (S' 10 Received by: Sample Matrix Received by: Received by: Received by: Received by: S-Soil SL-Sludge SOL-Solid W-Wipe 11 Windsor W: John Ceresnak Time E-Mail 19-Nov INVOICE TO: 11/19/2008 Date Address: FAX# Attn: Attn: **PO#** Depth NA Project Name: PVSC MONITORING CUSTOMER INFO Sampler: HANOVER CONTROLS Known Hazard: Yes or No Describe: ambiguities have been resolved. 01- WASTEWATER COMPOSITE Signature/Company PATERSON, NJ 07503 SAMPLE INFORMATION Company: Abuelito Cheese Project Location (State): Address: 607 Main ST. Project Manager: Bottle Order #: Felephone #: telinquished by: Relinquished by: elinquished by: elinquished by: elinquished by Client ID Quote #: Fax #:

Phone # (973) 361-4252

Fax # (973) 989-5288



ANALYTICAL DATA REPORT

for

Abuelito Cheese 607 Main Street Paterson, NJ 07503

Project Name: PVSC MONITORING Lab Case Number: E08-13295

| = METHOD DETECTION LIMIT |
|--------------------------|
| |
| |
| |
| |

Metals

Lab ID: 13295-001

Client ID: 01

Matrix-Units: Aqueous-mg/L

Percent Moisture: 100

Date Sampled: 11/19/2008

Time Sampled: NA

Date Analyzed: 12/2/08

| : 100 | | | |
|-----------|----------|--------|--|
| Parameter | Result Q | MDL | |
| Cadmium | ND | 0.001 | |
| Copper | ND | 0.008 | |
| Lead | 0.00287 | 0.002 | |
| Mercury | 0.000749 | 0.0005 | |
| Nickel | ND | 0.004 | |
| Zinc | 0.252 | 0.008 | |

General Analytical

Lab ID: 13295-001

Client ID: 01

Percent Moisture: 100

Date Sampled: 11/19/2008

Time Sampled: NA

| Parameter | Result | MDL | Matrix-Units | Date Analyzed |
|---------------------------|--------|------|--------------|------------------|
| Biochemical Oxygen Demand | 10100 | 2.00 | Aqueous-mg/L | 11/19/2008 15:30 |
| Total Suspended Solids | 2430 | 250 | Aqueous-mg/L | 11/20/2008 11:00 |

ND = Analyzed for but Not Detected at the MDL

These data have been reviewed and accepted by:

Laboratory Director



Abuelito Cheese Process Water Meter Reading

19213cu/ft x 7.48=143713 x.95=136527 total gallons for the month of November 136527 divided by 22 days= 6205 gallons per day